Revised Manifest Summary Report

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SIGN WIZE	85	

Manifest Date	Bates#	Manifest#	Quantity	Units	Gallons	Code	# Trips	Assessed (gl) Volume	
08/29/1989		88418509		2502	LBS		CMP		

Total Records: 1

Default Volume: 0

Total Waste Volume: 1.251

Department of Health Services See Instructions on Back of Page 6 State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91) Toxic Substances Control Division and Front of Page 7 Sacramento, California Please print or type. (Form designed for use on elite (12-pitch typewriter). 2.1Page ! Information in the shaded areas Comeratoria US EPA 10 No. 4 2 3 31 100 minutes No. 0 UNIFORM HAZARDOUS is not required by Federal law. WASTE MANIFEST A. State h 282 N.Park Ave., Pomona, CA 917.68 B. State Generator's ID 714-620-8989 C. State Transporter's ID °С д D У БУВ В В В 9 Transporter 1 Company Name Inc. 1-800-862-7550 E. State Transporter's 10 US EPA ID Numbe 7. Transporter 2 Company Name F. Transporter's Phone G. State Facility's ID Designated Facility Name and Site Address OMEGA RECOVERY SERVICES US EPA ID Number CALL 12504 E. WHITTIER BLVD. 213-698-0991 C, A, D, O, 4, 2, 2, 4, 5, 0, 0, 1 WHITTIER, CA 90602 1850 C 13. Total Weste No. Quantity 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Wt/Vo Тур a. Waste Combustible Liquid, N.O.S. 223 / NA 1993, DOT-E 7/70 "RQ" EPANONE/ G 0.0.1ωĒ State 1-800-424-8802 EPA/Other State FPA/OH State CENTER d. landling Codes for Wastes Listed Above RESPONSE J. Additional Descriptions for Materials Listed Above Water 30%, petroleum oil & distillates 45% Solids include dirt, paints and inert d. inorganics. NATIONAL 15. Special Handling Instructions and Additional Information OMEGA # 13153 Gloves & Goggles NSI# 1670 뿔 CALL 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. SPILL If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. F EMERGENCY Dey of Materials TK# /808 17. Transporter Acknowledgeme ş Printed/Typed Name 157 ᆼ 18. Transporter 2 Acknowledgement of Receipt of Materials CASE Day Month Signature Printed/Typed Name 19. Discrepancy Indication Space AC 20. Facility Owner or Operator Certification of receipt of hazardous materials covered by Month Day

OHS 5022;A (1/88)

PA 8700-22 (Rev. 9-88) Previous editions are obsolete.

Printed/Typed Name

FRANK

OFLO

Do Not Write Below This Line

White: TSDF SENDS THIS COPY TO DOHS WITHIN-30 DAYS
To: P.O. Box 3000, Sacramento, CA 95812

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